

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90042 021 ***150.00

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1. Entity Name

WAREHOUSE G.P. CORP.



Principal Place of Business

930 WASHINGTON AVENUE
4TH FLOOR
MIAMI BEACH FL 33139-5084

Mailing Address

930 WASHINGTON AVENUE
4TH FLOOR
MIAMI BEACH FL 33139-5084

2. Principal Place of Business

6625 Miami Lakes Drive

3. Mailing Address

6625 Miami Lakes Drive

Suite, Apt. #, etc.

Suite 316

Suite, Apt. #, etc.

Suite 316

City & State

Miami Lakes, Florida

City & State

Miami Lakes, Florida

Zip

33014-2705

Country

USA

Zip

33014-2705

Country

USA

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0656972

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRIEDMAN, MICHAEL D
930 WASHINGTON AVENUE, 4TH FLOOR
MIAMI BEACH FL 33139-5084

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6625 Miami Lakes Drive

Suite 316

City

Miami Lakes

FL

Zip Code

33014-2705

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when constituting)

1/30/06

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME FRIEDMAN, MICHAEL D
STREET ADDRESS 930 WASHINGTON AVENUE, 4TH FLOOR
CITY-ST-ZIP MIAMI BEACH FL 33139-5084

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6625 Miami Lakes Drive, Suite 316
CITY-ST-ZIP Miami Lakes, Florida 33014-2705

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/06

Date:

(305) 777-0760

Daytime Phone #